

FILED

03 MAY 23 PM 2:55

**COMPLAINT BY A PRISONER UNDER THE CIVIL RIGHTS ACT, 42 U.S.C §§ 1983**

Name WEAVER WILLIE  
 (Last) (First) (Initial)

Prisoner Number J-91389

Institutional Address PELICAN BAY STATE PRISON P.O. Box  
7000 CRESCENT CITY, CA. 95531.

**UNITED STATES DISTRICT COURT  
 NORTHERN DISTRICT OF CALIFORNIA**

WILLIE WEAVER  
 (Enter the full name of plaintiff in this action.)

vs.

Case No. JW  
 (To be provided by the Clerk of Court)

THIRD WATCH  
CORRECTIONAL OFFICER  
DANIAL ON/05/17/08

**COMPLAINT UNDER THE  
 CIVIL RIGHTS ACT,  
 Title 42 U.S.C § 1983**

(PR)

(Enter the full name of the defendant(s) in this action)

**[All questions on this complaint form must be answered in order for your action to proceed..]**

**I. Exhaustion of Administrative Remedies.**

**[Note:** You must exhaust your administrative remedies before your claim can go forward. The court will dismiss any unexhausted claims.]

A. Place of present confinement P.S.U.

B. Is there a grievance procedure in this institution?

YES (✓) NO ( )

C. Did you present the facts in your complaint for review through the grievance procedure?

YES (✓) NO ( )

D. If your answer is YES, list the appeal number and the date and result of the appeal at each level of review. If you did not pursue a certain level of appeal, explain why.

COMPLAINT

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1. Informal appeal \_\_\_\_\_

2. First formal level \_\_\_\_\_

3. Second formal level \_\_\_\_\_

4. Third formal level \_\_\_\_\_

E. Is the last level to which you appealed the highest level of appeal available to you?

YES ( ) NO (✓)

F. If you did not present your claim for review through the grievance procedure, explain why. STILL BEING PROCESSED

II. Parties.

A. Write your name and your present address. Do the same for additional plaintiffs, if any.

WILLIE WEAVER PELICAN BAY  
STATE PRISON P.O. BOX 7000  
CRESCENT CITY, CA. 95531.

B. Write the full name of each defendant, his or her official position, and his or her place of employment.

PELICAN BAY STATE PRISON P.O.

1 7000 CRESCENT CITY, CA. 95531  
 2 CORRECTIONAL OFFICER DANIAL

3  
 4  
 5 III. Statement of Claim.

6 State here as briefly as possible the facts of your case. Be sure to describe how each  
 7 defendant is involved and to include dates, when possible. Do not give any legal arguments or  
 8 cite any cases or statutes. If you have more than one claim, each claim should be set forth in a  
 9 separate numbered paragraph.

10 CORRECTIONAL OFFICER DANIAL  
 11 REFUSED TO STOP HARRASSING  
 12 PLAINTIFF ON 05/17/08 SAT, PUT  
 13 ON HAND CUFF, THAT CUT INTO  
 14 PLAINTIFF ARMS, THERE WAS MEDICAL  
 15 ATTENTION, PLAINTIFF HAVE HAD  
 16 PROBLEMS FROM THIS CORRECTIONAL  
 17 OFFICER DANIAL OF HARRASSMENTS  
 18 CORRECTIONAL OFFICER THE DEFENDANT  
 19 SHOWED DELIBERATE INDIFFERENCE  
 20 UNDER THE EIGHT AMENDMENT THAT  
 21 CONSTITUTE CRUEL UNUSUAL PUNISHMENT

22  
 23 IV. Relief.

24 Your complaint cannot go forward unless you request specific relief. State briefly exactly  
 25 what you want the court to do for you. Make no legal arguments; cite no cases or statutes.

26 LIABILITY DAMAGES: 50,000  
 27 FIFTY THOUSAND DOLLARS DUE TO:  
 28 HARRASSMENTS, CONSPIRACY'S

1 U.S. CONSTITUTION VIOLATION,  
2 PUNITIVE DAMAGES: 50,000 FIFTY  
3 THOUSAND DOLLARS DUE TO: MENTAL  
4 ANGUISH, STRESS DISORDER

5 I declare under penalty of perjury that the foregoing is true and correct.

6  
7 Signed this 05 day of 17, 20 08

8  
9 Willie Weaver

10 (Plaintiff's signature)

WILLIE WEAVER  
J-91389 B-2-210

PELICAN BAY STATE

PRISON P.O. BOX 7000

CRESCENT CITY CA 95531

PELICAN BAY STATE PRISON  
5905 Lake Earl Dr  
Crescent City CA 95532



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CLERK U.S. DISTRICT COURT  
NORTHERN DISTRICT OF CALIFORNIA

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